



# SYDNEY OMS

ORAL & MAXILLOFACIAL SURGERY

**V Anura**

**MBChB, BDS, MDS (OMFS), FRACDS**

Oral and Maxillofacial Surgeon

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Suite 1, Level 4, 171 Bigge St, **Liverpool** NSW 2170

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## PATIENT INFORMATION

Date: \_\_\_\_\_

Patient's Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Patient's Phone: \_\_\_\_\_

Patient's Email: \_\_\_\_\_

## REASON FOR REFERRAL

☐ Implants

☐ Wisdom Teeth

☐ Jaw surgery

☐ Bone Grafting

☐ Extractions

☐ Facial fractures

☐ Pathology

☐ TMJ

☐ Oral, Facial Lesions

Special Instructions \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## RADIOGRAPHS

☐ Please Take

☐ With Patient

☐ Being E-mailed

Referred by Dr: \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_

Provider Number: \_\_\_\_\_

**ALL APPOINTMENTS - 96423006 | 98224372**

www.sydneyoms.com

## PATIENT INSTRUCTIONS

### Instructions For First Visit:

- Please bring all **x rays** and **referral letter**
- Please talk to your private health insurance regarding level of cover for the procedure, hospital and anaesthetist.
- Please bring all medical information including a list of ALL medications you are currently taking.
- In some instances the consultation and surgery can be completed on the same day.